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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS		First Named Inventor		September 18, 2006 Michael A. Ellsworth	
	Title	Title		METHOD OF VACCINATION	
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Statement under 37 CFR 3.73(b) is enclosed. (Form	PTO/SB/96,)			
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NOTE: Signatures of all the inventors or assignees of record of the enti- signature is required, see below*	ire interest or	their representa	tive(s) are requir	ed Submit mi	altiple forms if more than one
*Total of3forms are submitted.					
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POWER OF ATTORNEY	Filing Date		September 18, 2006	
	First Named Inventor	Michael A. E		
CORRESPONDENCE ADDRESS	Title		METHOD OF VACCINATION	
INDICATION FORM	Art Unit			
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	Attorney Docket Number	PC32199A		
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•		Application Number	110/593.134		
POWER OF ATTORNEY and CORRESPONDENCE ADDRESS		Filing Date	September 18, 2006 Michael A. Ellsworth METHOD OF VACCINATION		
		First Named Inventor			
		Title			
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